

**STATE OF NEVADA
AGING AND DISABILITY SERVICES DIVISION**

**SERVICE SPECIFICATIONS
FOR INDEPENDENT LIVING GRANTS (ILG)
GENERAL REQUIREMENTS**

Any exception to these Service Specifications must be requested in advance, in writing, and approved by the Deputy Administrator.

PURPOSE:

The Aging and Disability Services Division (ADSD) has been authorized under Nevada Revised Statute (NRS) 439.630 to award grant Tobacco Settlement funds to governmental, private and non-profit agencies for the purpose of providing services to seniors in Nevada to assist with independent living, including programs that provide:

- 1) respite care or relief to family caregivers;
- 2) transportation to new or existing services; and/or
- 3) care in the home that allows senior citizens to remain at home and avoid institutional care.

To promote quality of service, ADSD has established service specifications that contain general guidelines for administrative and operating procedures for funded services. ADSD will use these service specifications as the basis for assessing program performance. The service specifications that each grantee must follow consist of GENERAL REQUIREMENTS and SERVICE-SPECIFIC REQUIREMENTS established for each funded service. If the service has not been previously funded by the Division, SERVICE-SPECIFIC REQUIREMENTS may be established during the initial grant period.

GENERAL REQUIREMENTS:

- A. Pursuant to Nevada Revised Statute (NRS) 200.5093, all grantees must report suspicion of elder abuse, neglect, isolation and/or exploitation no later than 24 hours after such knowledge is obtained. The program may be subject to cancellation of the grant award, or ADSD may withhold funds, if any staff member, volunteer or director of a program is convicted of elder abuse.
- B. Pursuant to NRS 202.2491(1) (c) (1), all grantees must comply with state law regarding smoking in public places.
- C. Grantees must comply with fiscal management policies issued by the Aging and Disability Services Division in the most current *Program Instructions - Nevada (PINs)*.
- D. The grantee shall hold harmless, defend and indemnify the State of Nevada, Department of Health and Human Services and the Aging and Disability Services Division from any and all claims, actions, suits, charges and judgments whatsoever that

arise out of the grantee's performance or nonperformance of the services or subject matter called for in the grant agreement.

SPECIFICATIONS:

1. Eligibility:

- 1.1 Persons served with Independent Living Grant funds must be 60 years of age or older. An exception to the age requirement without limitation for caregivers of any person with Alzheimer's disease or other related dementia.
- 1.2 Proof of U.S. citizenship is not required to receive services from this funding source.
- 1.3 Grantees are required to target services to low-income, minority, rural, homebound, and frail individuals (including Native Americans) in order to assist them with "independent living." Low-income is defined as having an income that is at or below 100% of the current Federal Poverty Guidelines. The Division will provide guidance to programs in developing a Targeting Plan during the grant application process. The Targeting Plan contained in the approved grant application must be implemented.
 - 1.3.a Documentation of the Targeting Plan activities and any other targeting activities provided during the grant year shall include:
 - 1.3.a.1 Copies of publicity and outreach materials distributed, including locations and dates of distribution;
 - 1.3.a.2 Dates of outreach contacts, including name of agency contacted, name and title of contact, and brief description of the outcome of the contact;
 - 1.3.a.3 Dates of special events and purpose;
 - 1.3.a.4 A brief narrative updating targeting projects that involve multiple steps; and
 - 1.3.a.5 Other documentation necessary to demonstrate that the Targeting Plan has been implemented.

2. Documentation and Reporting Requirements:

- 2.1 Grantees are required to meet the program reporting requirements for Independent Living Grant funded programs as established by the Aging and Disability Services Division.

- 2.1.a Grantees are required to submit all applicable reports and/or complete data entry per the Division's Grantee Reporting Schedule.
- 2.2 Independent Living Grant funded programs shall:
 - 2.2.a Update registration forms for all active clients in the first quarter of the fiscal year and complete registration forms on new clients as they enter the program. Any deviation from this schedule must be approved by the Division. Clients must sign and date the registration form indicating that the information provided is correct.
 - 2.2.a.1 Income self-determinations are to be based only on the client and the client's spouse, as applicable. Including other family income to determine poverty level status is not allowed.
 - 2.2.b Enter client information into the Social Assistance Management System (SAMS) as it is made available to the program on the client registration form. The information entered into SAMS must be accurate and kept up-to-date.
 - 2.2.c Provide each client with the *Notice of Privacy Practices* made available by the Aging and Disability Services Division, unless the client has received the *Notice* from another Division-funded program, as noted in SAMS.
 - 2.2.c.1 The client must receive the *Notice* annually.
 - 2.2.c.2 The client's date of receipt is to be noted in User Fields within their SAMS consumer file. The date must be updated each year for all active clients.
 - 2.2.d Develop and maintain a system for recording the units of service provided to each client daily (e.g., daily sign-in sheets, time sheets, logs or client files).
 - 2.2.e Enter units of service provided by the program into the SAMS database by the 10th day of the following month.
 - 2.2.e.1 All fixed-fee programs are required to utilize the Daily Unit Details feature in SAMS to record specific dates on which a unit of service was delivered.
- 3. Operating Procedures - Grantees are required to submit a written copy of the following operating policies/procedures to ADSD as requested, or when a revision has been made:

3.1 Client Cost Sharing and Donation Procedures:

- 3.1.a The opportunity to make confidential, voluntary, non-coercive contributions is required. Means testing and denial of service based on non-contribution are prohibited.
- 3.1.b Establish procedures to protect the privacy of individuals regarding their contributions.
- 3.1.c A suggested donation amount shall be established for services provided through the grant(s).
- 3.1.d A consumer may be encouraged to share the cost of services based on a specific program's sliding-fee schedule. Sliding-fee schedules must be submitted to the Aging and Disability Services Division for review and approval prior to implementation. (PIN 30)
 - 3.1.d.1 Cost sharing with specific safeguards will be allowed for limited supportive services. However, cost sharing will not be allowed for information and assistance, outreach, benefits counseling, case management, legal assistance, congregate and home-delivered meals, services provided by tribal organizations or services to individuals with incomes at or below 185% of the current Federal Poverty Guidelines. (Appendix 3 of PINS)

3.2 Advocacy, Information and Referral Procedures:

- 3.2.a Grantees are required to establish, acquire or develop, and utilize a comprehensive list of resources available to seniors within their service area.
- 3.2.b Grantees are required to maintain current program information on the Aging and Disability Resource Center (ADRC) website, www.nevadaadrc.com, and include ADRC program and contact information in their Advocacy, Information and Referral policy.
- 3.2.c Any client who needs or requests assistance in completing a referral shall be provided an appropriate level of assistance.

3.3 Client Grievance Procedure:

- 3.3.a A formal grievance procedure must be established for occasions when the client is not satisfied with efforts made by the program to resolve concerns. The formal procedure must clearly define the steps that the program will take to resolve formal complaints. The procedures must:

- (1) specify that complaints are to be submitted in writing;
- (2) provide for an impartial review;
- (3) ensure that complaints are acted on in an expeditious manner; and
- (4) stipulate that assistance will be available to clients who require help in preparing a written complaint.

3.3.b Grantees who contract with other agencies for the provision of services must establish a procedure to ensure that client complaints are directed to the grantee agency. A complaint tracking system must be maintained to include:

- (1) date of complaint;
- (2) client's name, address and telephone number;
- (3) client's perception of the problem;
- (4) date of follow-up with the contractor; and
- (5) action taken to resolve the complaint.

3.4 Procedure for Suspension or Termination of Clients from Service:

3.4.a Grantees are required to establish a written procedure that defines the steps that will be taken to suspend or terminate clients from service. A suspension or termination is to be undertaken only after all other reasonable measures for resolving the concern have been exhausted. The procedure must contain the following provisions:

- (1) description of behaviors that are considered grounds for suspension or termination, if circumstances allow;
- (2) documentation of the incident;
- (3) procedure for warning the client prior to suspension;
- (4) written notification of suspension/termination provided to the client; and
- (5) client appeal process. Whenever feasible, clients are to be placed on temporary suspension.

3.5 Emergency Procedures:

3.5.a Grantees are required to develop written procedures for staff to follow in addressing client medical emergencies. The procedures must address the basic steps staff members need to take in responding to an actual or potential emergency. Programs providing services in the homes of clients should also develop procedures when clients do not answer the door or cannot be located during a scheduled visit.

3.5.b When services are provided in a facility, grantees are required to develop written emergency procedures for fire, flood, earthquake, bomb threat,

physical assault/threat and other natural and technological disasters that might require emergency response and/or evacuation of the facility.

- 3.5.c Grantees are required to work with governmental agencies during emergencies to ensure the safety of clients and others in the community.

3.6 SAMS Procedures:

- 3.6.a Grantees must develop written, internal procedures for staff on entering required data elements into SAMS. The basic purpose of these procedures is to create continuity of program operation.
 - 3.6.a.1 Grantees are responsible for training their personnel on SAMS data entry procedures.
 - 3.6.a.2 Procedures must address, at a minimum, the basic steps of inputting data, ensuring data is accurate and complete, and correcting inaccurate or incomplete information in the system.
 - 3.6.a.3 Aging and Disability Resource Center (ADRC) grant recipients are exempt from this requirement due to the existence of an ADRC-specific SAMS Manual. However, ADRC grantees must create a manual for any other ADSD-funded services that require data entry in SAMS, if applicable.

4. Training:

4.1 Elder Abuse Awareness:

- 4.1.a Persons providing direct service to seniors shall be provided with an annual training on recognizing the signs of elder abuse and the Nevada Elder Abuse Law (NRS 200.5092 - 200.5099). The Division-approved Elder Abuse PowerPoint, located at www.nvaging.net/epstraining.htm, is to be used, unless Division staff, or a pre-approved representative, is able to provide an in-service training.
 - 4.1.a.1 Documentation is to be available for review at the request of the Division and must include:
 - (1) Date of training;
 - (2) Signatures of staff and/or volunteers in attendance; and
 - (3) Method of training (PowerPoint vs. In-Service).
 - a. In-service documentation must also include the name and title of the trainer.

5. Quality Improvement:

5.1 Sub-Contractor Performance Review:

- 5.1.a Grantees who contract with other agencies for the delivery of service must develop standardized criteria to evaluate the performance of the contractor. Performance evaluations must be conducted and documented annually.

5.2 Grantee Performance Review:

- 5.2.a Programs will develop and implement pre and post performance indicator surveys to assess the impact of the services provided to the client and/or caregiver. New clients will be asked to complete a pre-survey upon entering the program, with the post-survey given as a follow-up within six (6) months of the first survey. Survey questions are subject to the approval of the Aging and Disability Services Division.
- 5.2.b The program shall establish an annual method to determine consumer satisfaction with service through questionnaires or some other means. The results of the quality improvement review must document the process, instruments used and individuals involved. Program deficiencies found must be documented and a plan of correction must be developed.

6. Special Compliance Requirements:

6.1 Confidentiality:

- 6.1.a Grantees must obtain a client's informed consent prior to disclosing information about the client to other agencies. In compliance with the Aging and Disability Services Division's *Program Instructions – Nevada*, PIN 2: The Division's ability to evaluate the grant will not be denied or hindered. This includes access to any document or record that is pertinent to administering the program. This also includes the right to interview participants/clients, grantee personnel and program staff, in accordance with confidentiality regulations.

Providers of legal assistance are not required to reveal any information to ADSD that is protected by attorney-client privilege.

- 6.1.b Grantees must establish procedures to limit access to client records to appropriate staff and ensure that client records are stored in a secure manner.

6.2 Waiting Lists:

A waiting list is to be established only after all other measures for improving the efficiency of the service delivery system have been examined and, when feasible, implemented. Grantees are required to establish a waiting list policy that will be activated in the event that demand for service exceeds the program's capacity. Waiting list documentation must include, at a minimum:

6.2.a The client's name, address, and telephone number;

6.2.b the date the client was placed on the waiting list; and

6.2.c the description of each client's need for service.

Services are targeted to those clients with the greatest social and economic needs, with particular attention to low-income individuals, minority individuals, those in rural communities, those with limited-English proficiency and those at the greatest risk of institutional care. Those at risk of institutional care are to receive highest priority consideration. The program must establish a procedure for updating the continued service needs of clients placed on the waiting list.

6.3 Service Prohibitions:

6.3.a Staff shall not accept tips, gifts, loans or fees from clients.

6.3.b Staff shall not smoke in clients' homes or while transporting clients.

6.3.c Staff shall not purchase alcohol or illegal substances for clients.

6.3.d Staff shall not borrow the client's car or other personal belongings.

6.3.e Staff shall not bring family members, other people or pets to the client's home without the client's permission and supervisory approval.

6.3.f Staff shall not eat the client's food.

6.4. Safety:

6.4.a The grantee cannot assign staff, volunteers or contractors to work in conditions that jeopardize their safety.

6.4.a.1 Staff shall not be required to enter a client's home if it appears to be an unsafe work environment.

6.4.b A qualified professional will supervise volunteers, if applicable.

- 6.4.c Prior to providing services, staff, professionals and volunteers who have direct contact with clients, enter a client's home or provide transportation, are required to undergo a background check. This helps ensure client safety and demonstrates there is no recorded criminal history that indicates a potential threat to clients served.
 - 6.4.c.1 If the background check returns a record of criminal history and the employee or volunteer indicates that record is incorrect, he/she will be given 30 days to correct the record prior to any action being taken to suspend or terminate employment or volunteerism. These individuals must be directly supervised during the 30-day period of review.
 - 6.4.c.2 Conviction of the crimes found in NRS 449.174, 1(a) (1-15), will disqualify persons from working or volunteering for programs funded by the Aging and Disability Services Division (ADSD).
 - 6.4.c.3 An individual who refuses to consent to a background or criminal registry check is ineligible to work or volunteer in programs funded by ADSD.
 - 6.4.c.4 Individuals for whom the background check results are pending, may be enrolled as a volunteer, but may not have unsupervised access to clients until satisfactory results are received.
 - 6.4.c.5 Documented results from a valid, fingerprint-based background check, completed within 12 months by another entity, may be used to determine eligibility to work or volunteer in programs funded by ADSD.
 - 6.4.c.6 Employees and volunteers working in programs funded by ADSD must sign a Self-Declaration Regarding Criminal Conviction form (Appendix A), one year after the completed background check, and on an annual basis thereafter.
 - 6.4.c.7 Professionals are exempt from this requirement if they are licensed and bonded.
 - 6.4.c.8 Individuals who receive direct, in-person supervision while in contact with clients are exempt from this requirement.

APPENDIX A

AGING AND DISABILITY SERVICES DIVISION

SELF-DECLARATION REGARDING CRIMINAL CONVICTION (For Grantee Staff and Volunteers)

The undersigned employee or volunteer declares that he or she has never been convicted of:

- Murder, voluntary manslaughter or mayhem;
- Assault with intent to kill or to commit sexual assault or mayhem;
- Sexual assault, statutory sexual seduction, incest, lewdness, indecent exposure or any other sexually related crime;
- Abuse, neglect, exploitation or isolation of a person age 60 or older;
- Abuse or neglect of a child or contributory delinquency;
- A violation of any federal or state law regulating the possession, distribution or use of any controlled substance or any dangerous drug as defined in Chapter 449.174 of NRS, within the preceding year;
- Any offense involving fraud, theft, embezzlement, burglary, robbery, fraudulent conversion or misappropriation of property, within the immediately preceding 7 years;
- Any other felony involving the use of a firearm or other deadly weapon within the immediately preceding year.

Print Name

Signature

Date

In the event that you have been convicted of any or all of the above-enumerated crimes, attach a statement providing the date(s), time(s), location(s), circumstance(s) and dollar amount of fine(s), including any conditions of your parole and/or probation.

A CRIMINAL CONVICTION IS NOT A BAR TO EMPLOYMENT. EACH CASE IS CONSIDERED ON ITS INDIVIDUAL MERITS.

FAILURE TO PROVIDE TRUTHFUL, CORRECT AND TIMELY INFORMATION IS GROUNDS FOR IMMEDIATE TERMINATION or DISMISSAL.